
FDA Oversight of Cell Therapy Clinical Trials

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FDA Organization

- Office of the Commissioner
 - Office of Combination Products
- CBER (Center for Biologics Evaluation and Research): vaccines, blood and blood products, human tissue/tissue products for transplantation, cell therapy, gene therapy, donor screening tests for blood and tissue safety, devices
- CDRH (Center for Devices and Radiological Health): devices for treatment, implants, diagnostic devices
- CDER (Center for Drug Evaluation and Research): drugs, monoclonal antibodies, therapeutic proteins)
- CVM
- CFSAN
- NCTR



CBER Organization

- Immediate Office of Director
- Office of Blood Research and Review
- **Office of Cellular, Tissue and Gene Therapies**
- Office of Vaccines Research and Review
- Office of Compliance and Biological Quality
- Office of Biostatistics and Epidemiology
- Office of Communication, Training and Manufacturers Assistance
- Office of Management



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OCTGT Products

- ❑ Cellular therapies
- ❑ Tumor vaccines and immunotherapy
- ❑ Gene therapies
- ❑ Tissue and tissue based products
- ❑ Xenotransplantation products
- ❑ Combination products
- ❑ Devices used for cells/tissues
- ❑ Donor screening tests (for use with cadaveric blood samples)

The “Tissue Rules”

(21 CFR 1271, Effective May 25, 2005)

| Tissue Rule | Issues Addressed |
|---|--|
| Establishment Registration and Listing | Applicability: types and uses of products that will be regulated by these rules; requirements for registering and listing products |
| Donor Eligibility | Requirements for donor screening and testing for “relevant communicable disease agents and diseases” |
| Current Good Tissue Practice (CGTP) | Manufacturing to ensure that HCT/Ps do not contain communicable disease agents; reporting; inspections |

21 CFR Part 1271

- These three rules form the platform for regulation of all human cells, tissues, and cellular and tissue-based products (HCT/Ps)
- For certain HCT/Ps (“361 HCT/Ps”), these regulations comprise the sole regulatory requirements
- For HCT/Ps regulated as drugs, devices, and/or biological products, the new tissue regulations supplement other requirements (GMP, QSR)

Premarket Review Pathways

- **Biologics Regulations**
 - IND – Investigational New Drug
 - BLA- Biologics License Application
- **Device Regulations**
 - IDE- Investigational Device Exemption
 - PMA- Premarketing Application
 - HDE- Humanitarian Device Exemption
 - 510k/De Novo
- **Combination products**
 - Pathway determined: Primary mode of action- RFD process (Office of Combination Products)
 - Previous intercenter agreements and precedents

Stem Cell-Based Products

- Fit regulatory definitions of the following:
 - Human cells, tissues, or cellular and tissue based products (HCT/P) (21 CFR 1271.3(d))
 - Biologics (PHS Act)
 - Drugs (FDC Act)
 - Cell therapy
 - Gene therapy- when genetic material is transferred to cells ex vivo

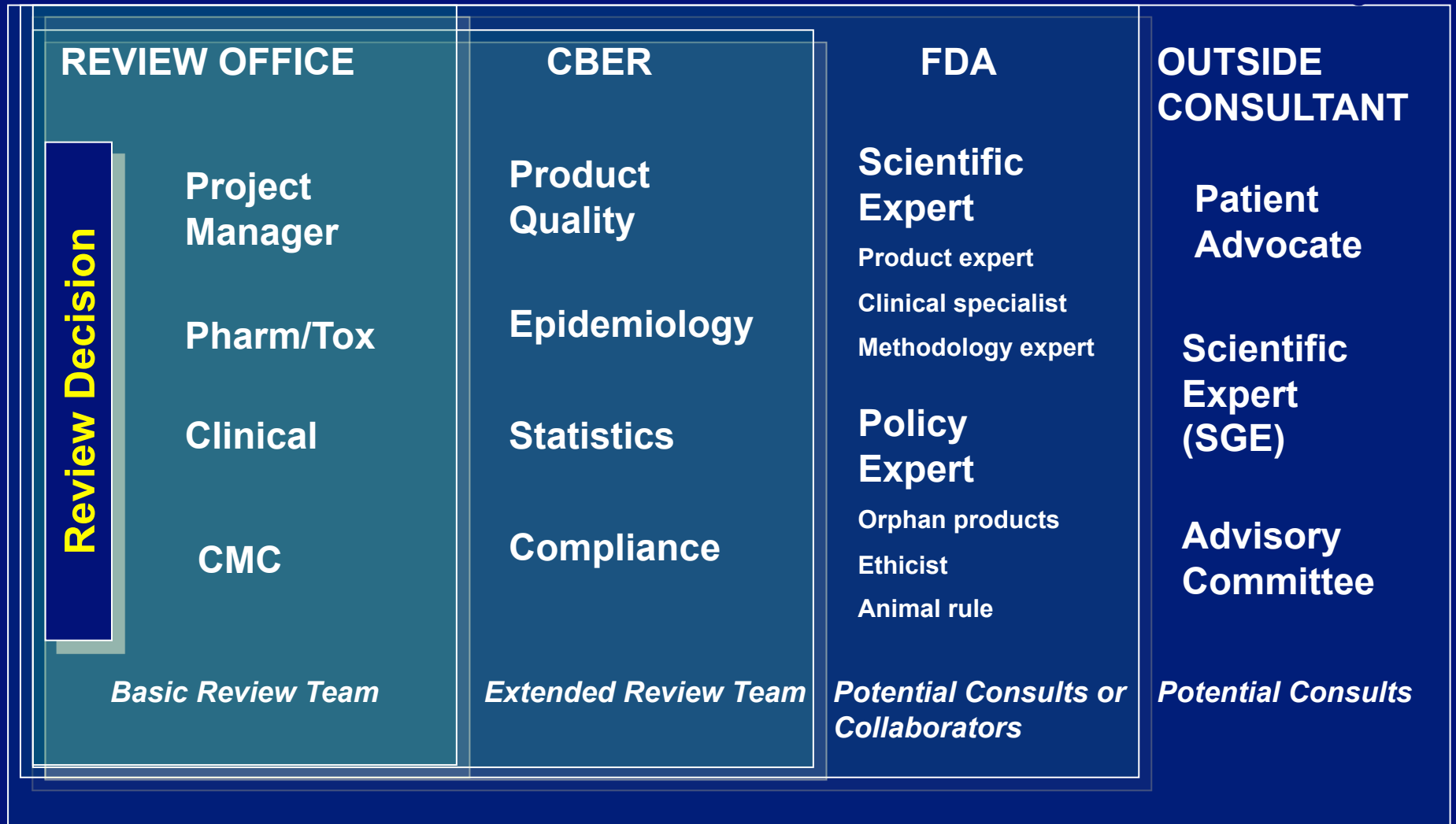
Evolution of Stem Cell Field

- ❑ Cell therapy and gene therapy products –and therefore stem cell products-- do not lend themselves to a “one size fits all” concept of product development and regulation
- ❑ Regulations set framework of criteria that must be fulfilled: safety, identity, purity, potency, and clinical efficacy
- ❑ Flexibility in how to fulfill the criteria

Examples of Safety Concerns for Stem Cells

- ❑ Defining the intended mode of action
- ❑ Characterization of the product, including potency
- ❑ Cell differentiation to undesired cell types
- ❑ Cell migration/trafficking to nontarget site(s)
- ❑ Potential uncontrolled cell proliferation or tumorigenicity
- ❑ Immunogenicity
- ❑ Graft-vs-host effects
- ❑ Interactions with devices, other tissues or drugs in vivo
- ❑ For gene-modified cells
 - Potential uncontrolled biological activity of the transgene
 - Alteration of expression of the nontransgenes
 - Insertional mutagenesis

FDA Review Team



Examples of CMC Issues

- Controls to prevent transmission of infection from the donor or introduction of infectious agents during cell processing
 - Donor Testing and screening for relevant communicable diseases
 - Autologous donors recommended but not required
 - Allogeneic donors must comply with 21 CFR 1271 Subpart C
 - HCT/P donor screening is medical history interview, physical assessment and medical record review
 - HCT/P donors are tested using FDA approved or cleared donor screening tests
- Cell banks- adventitious agent testing & characterization
- If mouse feeder layers used- test for the presence of murine viruses (and is a xenotransplantation product)
- Components, reagents, materials qualification



Examples of CMC Issues- 2

- Account for and control donor to donor variability
- Intrinsic safety concerns, based on cell source or history
- Adequate characterization of the product
 - Identity, purity, potency
 - Additional characterization
- System for product tracking and labeling
 - critical for patient specific products
- Stability of product and or cell line
 - number of passages/ doublings over time
 - maintain desired differentiation properties
 - karyotypic alterations
- Product comparability for manufacturing changes



Examples of Preclinical Issues

- ❑ Scientific basis for conducting clinical trial
- ❑ Data to recommend initial safe dose & dose escalation scheme in humans
- ❑ Proof of Concept Studies in relevant animal models
- ❑ Toxicology Studies in relevant animal species
 - Identify, characterize, quantify the potential local and systemic toxicities

Examples of Clinical Issues

- Collection procedure
 - Standard medical practice? Special instrument or kit?
- Optimal dose and administration
 - Starting dose level/dose escalation scheme
 - Route of administration
 - Dose schedule
- Define appropriate patient population
- If immunosuppression will be used:
 - Is the dose-schedule justified?
 - Long-term vs short term
 - Single drug vs a combination regimen
- Safety Monitoring plans
- Safety Reporting requirements
- Pediatric issues



Administration of Stem Cell Products

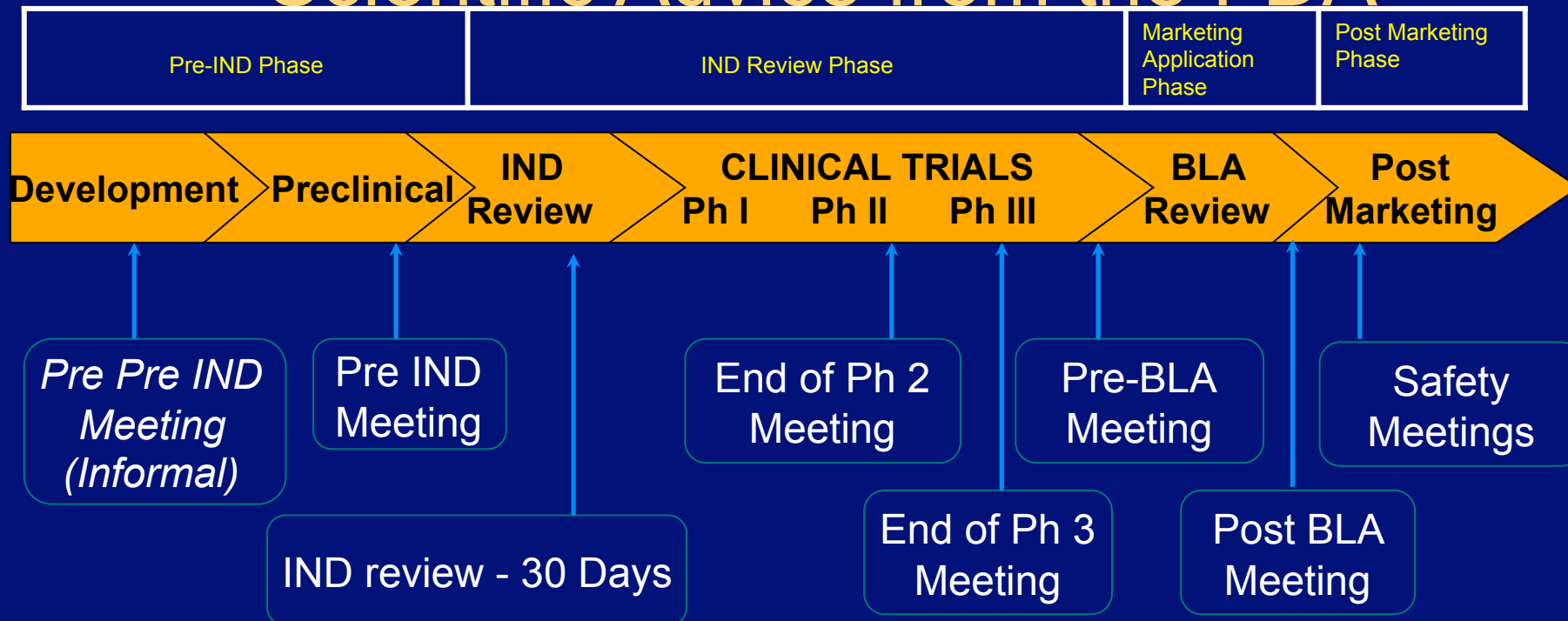
- Delivery of stem cells to certain anatomic locations may require novel procedures and/or novel delivery devices
 - This needs to be considered early
- Cells delivered by certain devices (i.e. catheter) will be a Combination Product
 - Cells under Biologics/Drug regulations and Device under Device regulations (see 21 CFR 3.2(e))
 - Early consultation with FDA, and Device manufacturer, about regulatory aspects
- Compatibility of cells with the device
- Preclinical testing of cells and device
- Delivery procedure used during clinical trial and beyond
 - Training of clinical investigators



Outstanding Needs for the Field

- ❑ Standardized reporting/publication of results
- ❑ Technology to enable validated assays for enhanced product characterization and testing
- ❑ Biologically relevant animal species/models that will provide useful information about safety of the product
- ❑ Technology to assess biodistribution and fate of the product in patients
- ❑ Data regarding optimal timing and methods for stem cell delivery

Scientific Advice from the FDA



- ❑ Provide advice in response to specific queries
- ❑ In person or by teleconference
- ❑ Written minutes for formal meetings
- ❑ No fee



CBER Outreach to Stakeholders

- Advisory Committees
- Regulations
- Guidance Documents
- Standards Activities
- Workshops
- Liaison Meetings
- International Harmonization

Public Discussions of the Issues

- ❑ Nov 9 2009 NIH/JDRF/FDA Workshop: Next Generation Beta-Cell Transplantation
- ❑ Oct 27 2009 FDA/NCI Workshop: Therapeutic Cancer Vaccines Considerations for Early Phase Clinical Trials Based on Lessons Learned from Phase III
- ❑ May 14 2009 CTGTAC: Animal Models for Porcine Xenotransplantation Products Intended to Treat Type 1 Diabetes or Acute Liver Failure
- ❑ May 15 2009 CTGTAC: Products Intended to Repair or Replace Knee Cartilage
- ❑ Mar 13 2009 FDA/NIH/CIBMTR/ASBMT Workshop: Clinical Trials Endpoints for Acute Graft-Versus-Host Disease After Allogeneic Hematopoietic Stem Cell Transplantation
- ❑ April 10 2008 CTGTAC: Safety of Cell Therapies Derived from Human Embryonic Stem Cells
- ❑ Topics prior to 2008:
 - Cellular Replacement Therapies for Neurological Disorders
 - Placental/Umbilical Cord Blood For Hematopoietic Reconstitution
 - Allogeneic Pancreatic Islets for Type 1 Diabetes
 - Cellular Products for the Treatment of Cardiac Disease
 - Cellular Products for Joint Surface Repair
 - In Vitro Analyses of Cell/Scaffold Products
 - Insertional Mutagenesis by Retroviral Vectors



Use of Consensus Standards by Federal Agencies

- Codified in the National Technology Transfer and Advancement Act of 1995
 - Implementation defined by FDA Policy
- Standards may be referred to in FDA Guidance and Regulation

Potential Benefits of Standards Use

- ☐ Facilitate the development and maintenance of guidance
- ☐ Address issues not covered by FDA Guidance
- ☐ Facilitate product design
- ☐ Improve time to market
- ☐ Leverage industry efforts
- ☐ May lead to international harmonization

Standards Examples:

- ❑ ASTM F2386 Standard Guide for the Preservation of Tissue Engineered Products
- ❑ ASTM F2383 Standard Guide for Assessment of Adventitious Agents in Tissue Engineered Products
- ❑ ASTM F2315 Standard Guide for Immobilization or Encapsulation of Living Cells or Tissue in Alginate Gels
- ❑ ATCC ASN-0002 Authentication of Human Cell Lines: Standardization of STR Profiling*
- ❑ AMII/ISO 13022 Tissue Safety*
- ❑ ISO 11238 Identification of Medicinal Products Structures and Controlled Vocabularies for Substances and Ingredients*

International Engagements

- As an emerging product area, cell and gene therapies are prime area for prospective harmonization and convergence of regulatory approaches
 - International Conference on Harmonisation (ICH)
 - FDA-EMA ATMP “Cluster”
 - Regulatory exchanges

ICH Gene Therapy Discussion Group (GTDG)

- Monitor emerging scientific issues
- Proactively set out principles that may have a beneficial impact on harmonization
- Ensure that the outcomes of the GTDG are well understood and widely disseminated
 - Public ICH web page
 - <http://www.ich.org/>
 - Public communications papers
 - Public press statements from the ICH SC
 - Public ICH workshops

Published ICH Considerations

- **General Principles to Address the Risk of Inadvertent Germline Integration of Gene Therapy Vectors, 10/2006**
- **Oncolytic Viruses, 11/2008**
- **Viral/Vector Shedding, 6/2009**

FDA-EMEA ATMP “Cluster”

- Formal cooperation and confidentiality arrangement between FDA and European Medicines Agency (EMA) for pharmaceuticals initiated 9/03; extended 9/05 to 9/2010
- Over time, “clusters” of specific areas of interest were developed for more targeted information exchanges
- With EMA product scope enlargement to include tissue engineering with cell and gene therapies (“advanced therapeutic medicinal products” – ATMPs), ATMP “cluster” initiated 2008

FDA-EMEA ATMP “Cluster”

- Regular teleconferences to share thinking on regulatory approaches, both general and specific issues
- Information sharing on draft documents
- Engage reciprocally in workshops and advisory committees, working parties

Regulatory Exchanges

- OCTGT has hosted on limited basis regulatory colleagues, Fall of 2009:
 - EMEA ATMP expert
 - Japan Pharmaceutical and Medical Device Agency (PMDA) cell therapy expert
 - Additional exchanges planned for Fall of 2010
- OCTGT experts routinely respond to foreign regulatory inquiries, calls for assistance, both through written communication, face-to-face exchanges, presentations at international fora

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